Amendment

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information			The section					
a. Full Name					c. ID Number			
THE COMMITTEE TO ELE	CT MONTY KEISTL	ER	RECEIVI	=D				
b. Mailing Address (include Ci	ty, State and Zip Code)				d. Date Filed			
3002 MERIWETHER LEWI MONROE, NC 28110	S TRL		JAN 2 9 201	8	01/26/2018			
		U	Inion Co. Board of El	ections	e. Phone Number (704) 995-3305			
2. Report Year 3. Period Star	rt Date (mm/dd/yy)	4. Period End	d Date (mm/dd/yy)	5. Treasur	er Full Name			
2017 1	0/24/2017	Contraction to the second particularity	The state of the same of the s	LARS KN	CONTROL OF THE PROPERTY OF THE			
6. Type of Committee (Check	One) 9. Tyr	e of Report	(check only one t	vpe of rep	ort from one category)			
X Candidate Campaign Pa			State/County	A STATE OF THE STA	Referendum			
☐ Joint Fundraiser ☐ PA	C	Organizational	☐ Organization	nal	☐ Organizational			
	gal Expense Fund	Thirty-five day	Quarterly		☐ Pre-referendum			
	le, check one)	Pre-primary	☐ First		☐ Final			
☐ "Booster Fund"		Pre-election	☐ Second		■ Supplemental Final			
Building Fund		Pre-runoff	Third		☐ Annual			
Presidential Election Year Car		Semi-annual	☐ Fourth		☐ Special			
NC Public Campaign Financing	g Fund	Mid Year	Semi-annual					
	X	Year End	☐ Mid Yea	ar	10. Special Report Name			
Other:		Final	Year En	ıd				
8. Number of Fundraisers this	s Report	Special	☐ Final					
0			☐ Special		1 1			
3. Account Information		3	Account Information	OT .				
a. Financial Institution Full Na	me		Financial Institution	And the last of th	e			
WELLS FARGO								
b. Purpose	c. Account Code	b. 3	Purpose		c. Account Code			
GENERAL	102							
	d. Period Begin Balan	ce		1 1 2	d. Period Begin Balance			
	\$	B. 1			\$			
CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board								
Lars Maj	18	Z			01/26/2018			
Printed Name of S	Signer	Signatur	e of Appointed Treas	urer	Date			
FOR OFFICE USE ONLY				1				
Date Received:	1/29/18	Employee	Klaum		ivery Method Normal Mail			
Date Postmarked:	1/29/18	Employee	Hacum	V I I I I I I I I I I I I I I I I I I I	Registered Mail Hand Delivered			
Date Scanned:		Employee	NA STATE		Electronically Filed			
Date Data Entered:		Employee			Signer has not received mandatory training			
	annot be used to amer nt treasurer, custodian d the Statement of Ore	of books info	rmation, or account	the comm	ittee address, treasurer, on.			

Detailed Summary

Amendment

Yes X No

Use this form to summarize all disclosure reporting forms and to total monetary information 1. Committee Full Name (and Fund if applicable) 2. Type of Report 3. ID Number THE COMMITTEE TO ELECT MONTY KEISTLER 2017 Year End Semi-Annual Total this Total this Start of Election Cycle: January 1, 2017 Reporting Period Election Cycle 4) Cash on Hand at Start 1.711.37 \$ 0.00 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ \$ 0.00 0.00(CRO-1210) 6) Contributions from Individuals 0.00 \$ 3,000.00 7) Contributions from Political Party Committees (CRO-1220) 0.00 \$ 0.00 (CRO-1230) \$ 8) Contributions from Other Political Committees \$ 0.00 0.00 9) Loan Proceeds (CRO-1410) 0.00 \$ 0.00 0) Refunds/Reimbursements to the Committee (CRO-1240) 0.00 \$ 0.00 1) Other Receipt Sources (CRO-1250) 11a) Interest on Bank Accounts 0.00 \$ 0.00 (CRO-1250) \$ \$ 11b) Contributions from Not-For-Profit Organizations 0.00 0.00 (CRO-1250) \$ 11c) Outside Sources of Income 0.00 0.00 (CRO-1270) \$ 11d) Legal Expense Fund - Other Sources \$ 0.00 0.00 11e) Exempt Purchase Price Sales (CRO-1265) 0.00 \$ 0.00 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 0.00 \$ 3,000.00 EXPENDITURES 3) Disbursements (CRO-1310) 13a) Operating Expenditures \$ \$ 1.074.05 2,362.68 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ 0.00 0.00 (CRO-1310) 13c) Coordinated Party Expenditures \$ 0.00 0.00 4) Aggregated Non-Media Expenditures (CRO-1315) \$ 0.00 0.00 (CRO-1420) \$ 5) Loan Repayments 0.00 0.00 6) Refunds/Reimbursements from the Committee (CRO-1320) \$ \$ 277.32 277.32 (CRO-1510) \$ 7) In-Kind Contributions 0.00 \$ 0.00 8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ 1,351.37 2,640.00 9) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 360.00 360.00 ADDITIONAL INFORMATION (CRO-1330) 20) Non-Monetary Gifts Given to Other Committees 0.00 (CRO-1430) \$ 0.00 21) Outstanding Loans (incl. ones from other campaigns) 22) Debts and Obligations owed by the Committee (CRO-1610) 0.00 (CRO-1620) 0.00 23) Debts and Obligations owed to the Committee 24) Account Transfers Within the Committee (CRO-1720) \$ 0.00 25) Administrative Support RECEIVED (CRO-1710) 0.00 0.00 (CRO-1440) .\$ 26) Forgiven Loans 0.00 0.00 JAN 2 9 2018 27) 48-Hour Notice Reports Sum (CRO-2220) \$ 0.00 \$ 0.00 28) Contributions to be Refundation Co. Board of Elections (CRO-1215) 0.00 0.00

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Pg	1	of	2		Yes	X	No	

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Ru	II Name (and Fund	if applicable)						2. ID N	ımber	
THE COMMIT	TEE TO ELECT I	MONTY KEISTLE	ER							
3. Type of Disbu	rsement (Please	use separate CRC)-1310 ₁	forms for each	t typ	e of Disbu	rseme	nt.)		
X Operating Exp		tributions to Candidat					era estimate de la companya de la c	ed Party I	xpendit	ures
4. Payee Inform	ation -			Add 🔲	Ren	ove				
	illing Address & P	ione		b. Coordinate	d Coi	nmittee Na	me	d. Com	nents	
(include city, sta			101000000							
FEDEX OFFICE				c. Level Regis	tarad	(Specify)				
2101 Younts Rd INDIAN TRAII				Federal	icicu	County:				
(704) 893-2179	2, NC 20079			☐ State	j			e. Electi	on Sum	to Date
(, 0 1, 0 2 2 1 7 2								\$		1 222 01
6 Assaunt Cade	a Form of Pouman	h. Purpose Code	10 No.40	Commission (Commission Commission	2 1	sadas kurgeske	υDa	[→] quired R		1,222.91
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102	Debit Card	В		/03/2017	\$	127.21	FLY.	ERS	Managara	
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	iling Address & P	ione		b. Coordinate	d Cor	nmittee Na	ım e	d. Comr	nents	
(include city, sta			17000							
FEDEX OFFICE			ŀ	c. Level Regis	tered	(Specify)	,			
2101 Younts Rd INDIAN TRAII				Federal	County:					
(704) 893-2179	5,110 20077			☐ State	İ	☐ Municip	ality:	e. Electi	on Sum	to Date
(\$		1,222.91
f. Account Code	g. Form of Paymen	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. At	nount	k. Re	quired R		
102	Draft	A	11	/06/2017	\$	20.95	WEE	BSITE		
					\$			•		¥
4. Payee Inform	ation		·	Add 🔲	Ren	юve				
a. Full Name, Ma	iling Address & P	ione		b. Coordinate	d Cor	nmittee Na	ım e	d. Com n	nents	
(include city, sta	te, & zip)									
WALMART					i siu bui	veducian:	. 1. Sept. 1			
2101 Younts Rd			ŀ	c. Level Regis		County:				
INDIAN TRAIL (704) 882-5566	J, NC 28079			State		☐ Municip		e. Electi	on Sum	to Date
(704) 002-3300										
			Tractic and					\$		372.40
	g. Form of Paymen			(mm/dd/yyyy)			k. Re	quired R	emarks	
102	Debit Card	I	11	/01/2017	\$	372.40				
					\$					
5. Total only this	Page							\$		1,043.10
6. Total of ALL	CRO-1310 Pages	Y. T.		***					1111	
		Summary Page CRO-	-1100 if	Operating Expe	nses)			e		1 074 05
(This line goes in	ı line 13b of Detailed	Summary Page CRO-	-1100 if	Contrib to Cand	idates		omm)	\$		1,074.05
(This line goes in	ı line 13c of Detailed	Summary Page CRO-	1100 if C	Coordinated Par	rty Ex	penditures)			ton-only court ***	
		l expenditure code								
A* - Media	BEP			indraising				er Cand		_ day jaka k
E - Salaries	J - Penalti			tical Party						xpenses
I - Postage O* Other	J - Penaiti IAN 2	9 2018	N " - U)	ffice Expenses	•	Q~ • D6	onatio	n to Leg	ai Expe	nse Fund
	detailed explanati	on in required rem	ıarks fi	eld(k)						

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committees and	report expenditures coordinated party e	xpenditures	ee for o	pperating expe	Pg nses,	2 of contribution	2 ons to	candidate/p	No N	
	ull Name (and Fund							2. ID Numb	er	
THE COMMI	TTEE TO ELECT M	ONTY KEISTLE	ER							
3. Type of Disb	ursement <u>(Please</u>	use separate CRO)-1310	forms for eac	h type	of Disbu	rseme	nt.)		
X Operating Ex	penses	ributions to Candidat	es/Polit	ical Committees				ed Party Expe	nditures	
4. Payee Inform				Add 🔲	Rem	ove				
	ailing Address & Ph	one		b. Coordinate	d Con	ımittee Na	ım e	d. Commen	ts	
(include city, sta										
WELLS FARG					D, ESCHERT	/O				
312 N Charlott				c. Level Registered (Specify) Federal County:						
MONROE, NC (704) 283-7515				State	ŗ	Municip		e. Election S	um to Date	
(104) 203-1313	,			4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	WETT ALLOWALL		THE TAXABLE	\$	10.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. An	ount	k. Re	quired Rema	irks	
102	Draft	А	1	1/17/2017	\$	10.00	FEE	,		
					\$					
4. Payee Inform	nation	I.		Add 🔲	Rem	ove				
a. Full Name, M	ailing Address & Ph	one		b. Coordinate			ame	d. Commen	ts	
(include city, st	ate, & zip)									
WIX.COM										
80 SW 8th				c. Level Regi	stered					
MIAMI, FL 33	3130			☐ Federal ☐ State	į.	County: Municip		e. Election S		
				L State	<u>I</u>	iviaiticip	ality:		oum to Date	
								\$	20.95	

102	Draft	Α	12/04/2017	\$	20.95	WEBSITE	
				\$			
5. Total only thi	s Page					\$	30.95
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7. Purpose Co	o des (List detail	ed expenditur	re code in (h.) above)				

f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount

O* Other * Codes require detailed explanation in required remarks field (k) CRO-1310

E - Salaries

I - Postage

A* - Media

NC State Board of Elections

C* - Fundraising

G - Political Party

K* - Office Expenses

December 2009

k. Required Remarks

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

RECEIVED

B* - Printing

J - Penalties

F* - Equipment

JAN 29 2018

Union Co. Board of Elections

Defur	ide/Da	imbu	reamante	From the Co	mmittaa -	1 .	_	endment	
								Yes 🛛 No	
			and Fund if ap	ements, including co	onthoutions rett	imed to the contri	2. ID Nu	mber	
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1	Y KEISTI				Referendum	Party			
1			EWIS TRL		e. Level Registo		h. Origii	ial Receipt Date	
1	DE, NC 2	28110			State	☐ County: ☐ Municipality:	09/27/2017		
(704) 99	95-3305				L. Brace	Municipanty.	i. Original Receipt Amount		
a construction		S . 1 (2) (2) (3) (3) (4)	Problem contract constitution of the				\$	3,000.00	
D. JOD LIE	le/Profess	1011	c. Employer's N	lame/Specific Field	f. Purpose Code	B	j. Electio	n Sum to Date	
					L		\$	0.00	
k. Accour	nt Code	l. Form	of Payment	m. Required Remar	ks	n. Date (mm/dd/y	yyy) o. A	mount	
102		Draft				12/19/2017	\$	277.32	
4. Total (only this	Page					\$	277.32	
	of ALL C ne must be			mmary Page CRO-110	0)		\$	277.32	
6, Pur	pose Cod	es (List	detailed disbur	sement code in (f) al	oove)	(4)			
L - Ret	urned to	Contrib	utor M - 0	Overpayment for Se	rvice	N - Exceed	led Contil	oution Limit	
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BARTHOWN CHRONOTOWN	Control of the Control of Control	THE PROPERTY OF THE PARTY OF TH	discontact standard management in the process of the contract	n required remarks	s field (m)				
CRO-13.					rd of Elections			July 2007	

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JAN 29 2018

Union Co. Board of Elections